

STATE OF MAINE

NOTIFICATION OF CHANGE IN  
HOME OFFICE ADDRESS  
BY MUNICIPALITY OR U.S. POSTAL  
SERVICE

\_\_\_\_\_  
Deputy Secretary of State

A True Copy When Attested By Signature

\_\_\_\_\_  
Deputy Secretary of State

\_\_\_\_\_  
(name of foreign entity)

The undersigned\* executes and delivers for filing the following Change of Home Office Address:

**FIRST:** The **old home office address** as it appears on the record in the Secretary of State's office:

\_\_\_\_\_  
( street, city, state and zip code - old address)

**SECOND:** The **new home office address**:

\_\_\_\_\_  
(physical location, not P.O. Box – street, city, state and zip code)

\_\_\_\_\_  
(mailing address if different from above)

**THIRD:** The jurisdiction of organization/incorporation is \_\_\_\_\_ and the date on which the entity was authorized to transact business in the State of Maine is \_\_\_\_\_.

**FOURTH:** This change of address was duly authorized by (choose one):

☐ Town/Municipality

☐ U.S. Postal Service

**DATED** \_\_\_\_\_

**\*\*By** \_\_\_\_\_  
(signature)

\_\_\_\_\_  
(type or print name and capacity)

- (1) \*To be filed by a foreign corporation, limited liability company, limited partnership or limited liability partnership to change the address of its registered or principal office in its jurisdiction of incorporation/organization or wherever located.  
(2) \*\*This document **MUST** be signed by the municipal official or postmaster.

**SUBMIT COMPLETED FORMS TO: CORPORATE EXAMINING SECTION, SECRETARY OF STATE,  
101 STATE HOUSE STATION, AUGUSTA, ME 04333-0101**